APPLN. TYPE	SMALL ENTITY	issue fee dub	PUBLICATION FEE DUE	PRÉV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nooprovisional	YES	\$700	\$300	\$0	\$1000	11/02/2006
EXAMINER		. ART UNIT	CLASS-SUBCLASS			
woo, julian w		3731	606-148000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363),			2. For printing on the patent front page 51141386 TBLSMANZ 63300034 160700 1605007			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 91 FC:2501 769.69 PA			
I "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) stisched. Use of a Custom Number is required.			registered attemey or a	e firm (having as a mach gent) and the names of u meys or agents. If no nam printed.	p to ·	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
VASCULAR	CONTROL SY	STEMS, INC.	San Juan	Capistrano, CA		
Please check the appropriate assignce category or categories (will not be printed on the patent): 🗆 Individual 💆 Corporation or other private group entity 🗀 Government						
42. The following fee(s) are submitted: 45. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						owa above)
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5. Change in Entity Sta						
a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.						
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Typed or printed nam	eMelissa	a J. Szanto		Date 10/5	40,834	
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